P	ATFNT	APPLICATIO	N FFF	DETERMINATION	RECORD
Г 1		AFFLIVATIO	17 1 66		11600110

Effective October 1, 2000

Application or Docket Number

)

LPS920000112USI

CLAIMS AS FILED - PART I (Column 1) (Column					mn 2)		SMALL EN		OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			31					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			3) minus 20= *		- //		X\$ 9=		OR	X\$18=	198	
INDEPENDENT CLAIMS			minus 3 = 1		• 5			X40=			X80=	1/20
MULTIPLE DEPENDENT CLAIM PRE									OR	·	400	
* If the difference in column 1 is less than zero, enter "O" in a						olump 2	ı	+135=		OR	+270=	70.8
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1508
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)					(Column 3)	,	SMALL E	NTITY	OR	OTHER SMALL I		
		CLAIMS	1	HIGH	EST		1		ADDI-			ADDI-
ENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID		PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
MON	Total	. 18	Minus		3(=	Y	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***	8	= /		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEI	PENDEN	T CLAIM			+135=		OR	+270≤	
								TOTAL		OD	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3	1	ADDIT. FEE		J O	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	TCLAIM			+135=		OR		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3	3)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	V00	<u> </u>
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIN					1		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												